

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON

NATHAN S. FORD, III,

Plaintiff,

v.

CAROLYN W. COLVIN, Acting  
Commissioner of the Social Security  
Administration,

Defendant.

CASE NO. 2:15-cv-0319 JRC

ORDER ON PLAINTIFF'S  
COMPLAINT

This Court has jurisdiction pursuant to 28 U.S.C. § 636(c), Fed. R. Civ. P. 73 and Local Magistrate Judge Rule MJR 13 (*see also* Notice of Initial Assignment to a U.S. Magistrate Judge and Consent Form, Dkt. 3; Consent to Proceed Before a United States Magistrate Judge, Dkt. 4). This matter has been fully briefed (*see* Dkt. 18, 19, 20).

After considering and reviewing the record, the Court concludes that the ALJ erred in failing to provide a germane reason for discounting the medical source opinion of Charles Herndon, MHP. Because the residual functional capacity ("RFC") would have

1 included additional limitations, and because these additional limitations may have  
2 affected the ultimate disability determination, the error is not harmless.

3 Therefore, this matter is reversed and remanded pursuant to sentence four of 42  
4 U.S.C. § 405(g) to the Acting Commissioner for further consideration.

### 5 BACKGROUND

6 Plaintiff, NATHAN S. FORD, III, was born in 1970 and was 35 years old on the  
7 alleged date of disability onset of February 2, 2006 (*see* AR. 143-49, 150-52). Plaintiff  
8 attended school to the ninth grade and later obtained his GED (AR. 804-05). He has work  
9 experience in a shipyard but was let go and told he was too sick to be working there (AR.  
10 809-10).

11  
12 According to the ALJ, plaintiff has at least the severe impairments of “diabetes,  
13 affective disorder, anxiety disorder, personality disorder, ADHD, and polysubstance  
14 abuse (20 CFR 404.1520(c) and 416.920(c))” (AR. 738).

15 At the time of the hearing, plaintiff was living alone in an apartment (AR. 806).

### 16 PROCEDURAL HISTORY

17 Plaintiff provides the following uncontested procedural history:

18 On October 29, 2008, Nathan S. Ford III filed claims for Social  
19 Security Disability Insurance Benefits and Supplemental Security Income  
20 disability benefits. Administrative Record (AR) 71-72, 735. His claims were  
21 denied initially and on reconsideration. AR 79, 81. Mr. Ford timely  
22 requested an administrative hearing. AR 83. On October 26, 2010, a hearing  
23 was held before Administrative Law Judge (ALJ) Marguerite Schellentrager.  
24 AR 29-69. On December 22, 2010, ALJ Schellentrager issued a decision  
denying Mr. Ford disability benefits. AR 11-23. On February 23, 2012, the  
Appeals Council denied Mr. Ford’s request for review. AR 1, 141. Mr. Ford  
then sought review in the United States District Court for the Western  
District of Washington. AR 870-71. On December 13, 2012, the Court

1 reversed the denial of benefits and remanded the matter for further  
2 administrative proceedings. AR 874-80.

3 On November 6, 2013, a second administrative hearing was held  
4 before ALJ Verrell Dethloff, and on November 18, 2013, ALJ Dethloff  
5 issued a decision denying disability benefits. AR 735-54, 802-44. Mr. Ford  
6 timely submitted written exceptions to the Appeals Council. AR 727-28. On  
7 January 16, 2015, the Appeals Council declined to assume jurisdiction over  
8 the matter. AR 722. This appeal follows.

9 (See Dkt. 18, p. 2.).

10 In plaintiff's Opening Brief, plaintiff raises the following issues: (1) Whether or  
11 not the ALJ properly evaluated the medical evidence in the record; and (2) Whether or  
12 not the ALJ properly evaluated the lay witness statement of Shawn Hayenga (*see* Dkt. 18,  
13 pp. 1-2). Because this Court reverses and remands the case based on issue 1, the Court  
14 need not further review other issues and expects the ALJ to reevaluate the record as a  
15 whole in light of the direction provided below.

### 16 STANDARD OF REVIEW

17 Pursuant to 42 U.S.C. § 405(g), this Court may set aside the Commissioner's  
18 denial of social security benefits if the ALJ's findings are based on legal error or not  
19 supported by substantial evidence in the record as a whole. *Bayliss v. Barnhart*, 427 F.3d  
20 1211, 1214 n.1 (9th Cir. 2005) (*citing Tidwell v. Apfel*, 161 F.3d 599, 601 (9th Cir.  
21 1999)).

### 22 DISCUSSION

#### 23 **(1) Whether or not the ALJ properly evaluated the medical evidence in the 24 record.**

25 Plaintiff contends that the ALJ erred by failing to provide a specific, germane  
26 reason for discounting the opinion of examiner Charles Herndon, MHP (*see* Opening

1 Brief, Dkt. 18, pp. 20-21). On August 11, 2008, Mr. Herndon performed a psychological  
2 evaluation of plaintiff for the Washington Department of Social and Health Services  
3 (“DSHS”) (*see* AR. 289-92). In that evaluation, Mr. Herndon found that plaintiff had  
4 marked depressed mood and social withdrawal, as well as moderate paranoid behavior  
5 and verbal expression of anxiety or fear (*see* AR. 290). Mr. Herndon assessed plaintiff  
6 with moderate recurrent major depression (*see id.*). Mr. Herndon ultimately opined that  
7 plaintiff had marked limitations in his ability to relate appropriately to co-workers and  
8 supervisors (*see* AR. 291).

9  
10 Pursuant to the relevant federal regulations, in addition to “acceptable medical  
11 sources,” that is, sources “who can provide evidence to establish an impairment,” 20  
12 C.F.R. § 404.1513(a), there are “other sources,” such as friends and family members,  
13 who are defined as “other non-medical sources” and “other sources” such as nurse  
14 practitioners, therapists and chiropractors, who are considered other medical sources, *see*  
15 20 C.F.R. § 404.1513(d). *See also Turner v. Comm’r of Soc. Sec.*, 613 F.3d 1217, 1223-  
16 24 (9th Cir. 2010) (*citing* 20 C.F.R. § 404.1513(a), (d)); Social Security Ruling “SSR”  
17 06-3p, 2006 SSR LEXIS 5 at \*4-\*5, 2006 WL 2329939. An ALJ may disregard opinion  
18 evidence provided by both types of “other sources,” characterized by the Ninth Circuit as  
19 lay testimony, “if the ALJ ‘gives reasons germane to each witness for doing so.’” *Turner*,  
20 *supra*, 613 F.3d at 1224 (*quoting Lewis v. Apfel*, 236 F.3d 503, 511 (9th Cir. 2001)); *see*  
21 *also Nguyen v. Chater*, 100 F.3d 1462, 1467 (9th Cir. 1996). This is because in  
22 determining whether or not “a claimant is disabled, an ALJ must consider lay witness  
23 testimony concerning a claimant’s ability to work.” *Stout v. Commissioner, Social*  
24

1 *Security Administration*, 454 F.3d 1050, 1053 (9th Cir. 2006) (*citing Dodrill v. Shalala*,  
2 12 F.3d 915, 919 (9th Cir. 1993); 20 C.F.R. §§ 404.1513(d)(4) and (e), 416.913(d)(4) and  
3 (e)).

4 “[O]nly ‘acceptable medical sources’ can [provide] medical opinions [and] only  
5 ‘acceptable medical sources’ can be considered treating sources.” *See* SSR 06-03p, 2006  
6 SSR LEXIS 5 at \*3-\*4 (internal citations omitted). Nevertheless, evidence from “other  
7 medical” sources, that is, lay evidence, can demonstrate “the severity of the individual’s  
8 impairment(s) and how it affects the individual’s ability to function.” *Id.* at \*4. The  
9 Social Security Administration has recognized that with “the growth of managed health  
10 care in recent years and the emphasis on containing medical costs, medical sources who  
11 are not ‘acceptable medical sources,’ . . . have increasingly assumed a greater  
12 percentage of the treatment and evaluation functions previously handled primarily by  
13 physicians and psychologists.” *Id.* at \*8. Therefore, according to the Social Security  
14 Administration, opinions from other medical sources, “who are not technically deemed  
15 ‘acceptable medical sources’ under our rules, are important, and should be evaluated on  
16 key issues such as impairment severity and functional effects.” *Id.*

17  
18 Relevant factors when determining the weight to be given to an other medical  
19 source include:

20  
21 How long the source has known and how frequently the source has seen  
22 the individual; How consistent the opinion is with other evidence; The  
23 degree to which the source present relevant evidence to support an  
24 opinion; How well the source explains the opinion; Whether [or not] the  
source has a specialty or area of expertise related to the individuals’  
impairments(s), and Any other factors that tend to support or refute the  
opinion.

1 2006 SSR LEXIS 5 at \*11.

2  
3 Here, the ALJ gave some weight to the opinion of Mr. Herndon, noting that the  
4 opined moderate restrictions in social and cognitive function were consistent with the  
5 medical evidence and plaintiff's daily activities (*see* AR. 750). The ALJ then stated,  
6 "However, such evidence is not consistent with Mr. Herdon's [sic] opinion that the  
7 claimant would have marked limitations in the ability to relate appropriately to co-  
8 workers and supervisors" (*id.*).

9 The Ninth Circuit has characterized lay witness testimony, including opinions  
10 from other medical sources, as "competent evidence," noting that an ALJ may not  
11 discredit "lay testimony as not supported by medical evidence in the record." *Bruce v.*  
12 *Astrue*, 557 F.3d 1113, 1116 (9th Cir. 2009) (*citing Smolen v. Chater*, 80 F.3d 1273, 1289  
13 (9th Cir. 1996)). However, an ALJ may discredit lay testimony if it conflicts with  
14 medical evidence, even though it cannot be rejected as unsupported by the medical  
15 evidence. *See Lewis, supra*, 236 F.3d at 511 (An ALJ may discount lay testimony that  
16 "conflicts with medical evidence") (*citing Vincent v. Heckler*, 739 F.2d 1393, 1395 (9th  
17 Cir. 1984); *Bayliss, supra*, 427 F.3d at 1218 ("Inconsistency with medical evidence" is a  
18 germane reason for discrediting lay testimony) (*citing Lewis, supra*, 236 F.3d at 511).

19  
20 Here, however, the ALJ's general claim that the limitation in ability to relate with  
21 co-workers and supervisors is inconsistent with the medical evidence is not supported by  
22 substantial evidence. Mr. Herndon's opinion was based on clinical interviews, testing,  
23 consultation with plaintiff's primary care provider, and a review of the medical record  
24

1 (see AR. 291). In the medical record, plaintiff's treating provider Ned Farmer, MA,  
2 opined that plaintiff had marked limitations in relating to co-workers and supervisors (see  
3 AR. 595). DSHS examining psychologist Victoria McDuffee, Ph.D. found that plaintiff  
4 had a marked limitation in communicating effectively in a work setting with even limited  
5 public contact and that he had a severe limitation in maintaining appropriate behavior in a  
6 work setting (see AR. 971). Examining physician Kathleen Andersen, M.D., opined that  
7 plaintiff had marked limitations in communicating and performing effectively and in  
8 maintaining appropriate behavior in a work setting, noting that plaintiff would likely be  
9 impulsive and impatient in interactions (see AR. 961-62).

11 Presumably, the ALJ found Mr. Herndon's opinion inconsistent with examining  
12 physician Erin Rubin, Psy.D., who found that plaintiff could accept instructions from  
13 supervisors and interact appropriately with co-workers, an opinion to which the ALJ gave  
14 significant weight (see AR. 749). However, with the breadth of medical evidence  
15 indicating that plaintiff was limited in interacting with co-workers and supervisors, Mr.  
16 Herndon's opinion could not fairly be dismissed as being generally inconsistent with the  
17 medical evidence. Though the ALJ discounted the opinions that concurred with Mr.  
18 Herndon's for various reasons, substantial evidence does not support the ALJ's statement  
19 that Mr. Herndon's opinion was inconsistent with the medical evidence.

20 Next, an ALJ may reject lay witness evidence, including opinions of other medical  
21 sources, if other evidence in the record regarding the claimant's activities is inconsistent  
22 therewith. See *Carmickle v. Commissioner, Social Sec. Admin.*, 533 F.3d 1155, 1164 (9th  
23 Cir. 2008). Though not explicitly stated when analyzing Mr. Herndon's opinion, the ALJ  
24

1 elsewhere found that plaintiff's ability to spend time with friends, maintain a relationship  
2 with a girlfriend, go to AA meetings, and babysit his niece and nephew is consistent with  
3 the RFC assessed, not with a marked limitation in interacting with co-workers and  
4 supervisors (*see* AR. 749).

5         However, substantial evidence does not support the ALJ's statement that  
6 plaintiff's activities are inconsistent with Mr. Herndon's opined limitation in the ability to  
7 relate appropriately to co-workers and supervisors. That plaintiff could maintain long-  
8 term friendships or a relationship with a woman he has known for twenty years does not  
9 demonstrate that he can appropriately interact with complete strangers in a full-time work  
10 environment (*see* AR. 46). Activities such as attending AA meetings do not require  
11 interaction with others at the level of a work environment. Similarly, caring for children  
12 does not demonstrate an ability to maintain appropriate workplace relationships with  
13 adults.<sup>1</sup> In fact, the record as a whole indicates that plaintiff generally avoids others  
14 outside of his circle and isolates himself because of the stress of interacting with others  
15 (*see, e.g.*, AR. 174, 182, 354 (broken teeth and abrasions on face from a fight), 964  
16 ("difficulty with every relationship he attempts to engage"), 968 ("every relationship I  
17 have is stressed"), 1142 (he "gets into it with everybody in his life"), 1152 (difficulty  
18 interacting with bus drivers and authority figures)).  
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22         <sup>1</sup> Notably, the ALJ found that plaintiff's daily activities were consistent with the  
23 assessments by state agency consultants who found that plaintiff should not interact with  
24 the general public, a limitation incorporated into plaintiff's RFC (*see* AR. 741, 748-49).  
However, the ALJ fails to explain why the same activities show that he was more capable  
of successfully interacting with co-workers and supervisors.



1       Moreover, having based his opinion on clinical interviews, testing, consultation  
2 with plaintiff's primary care provider, and a review of the medical record, there is no  
3 evidence that Mr. Herndon was not fully aware of plaintiff's activities when assessing  
4 plaintiff's functional limitations (*see* AR. 291). Therefore, because substantial evidence  
5 did not support the ALJ's alleged inconsistency between Mr. Herndon's opinion and  
6 plaintiff's activities, the ALJ offered no germane reason for discounting the opinion.

7       The Ninth Circuit has "recognized that harmless error principles apply in the  
8 Social Security Act context." *Molina v. Astrue*, 674 F.3d 1104, 1115 (9th Cir. 2012)  
9 (*citing Stout, supra*, 454 F.3d at 1054 (collecting cases)). The Ninth Circuit noted that "in  
10 each case we look at the record as a whole to determine [if] the error alters the outcome  
11 of the case." *Id.* The court also noted that the Ninth Circuit has "adhered to the general  
12 principle that an ALJ's error is harmless where it is 'inconsequential to the ultimate  
13 nondisability determination.'" *Id.* (*quoting Carmickle, supra*, 533 F.3d at 1162) (other  
14 citations omitted). Here, because the ALJ improperly discounted the opinion of Mr.  
15 Herndon in assessing plaintiff's RFC and plaintiff was found to be capable of performing  
16 work based on that RFC, the error affected the ultimate disability determination and is  
17 not harmless.

18       The Court may remand this case "either for additional evidence and findings or to  
19 award benefits." *Smolen, supra*, 80 F.3d at 1292. Generally, when the Court reverses an  
20 ALJ's decision, "the proper course, except in rare circumstances, is to remand to the  
21 agency for additional investigation or explanation." *Benecke v. Barnhart*, 379 F.3d 587,  
22 595 (9th Cir. 2004) (citations omitted). Thus, it is "the unusual case in which it is clear  
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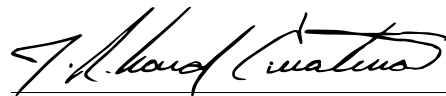
1 from the record that the claimant is unable to perform gainful employment in the national  
2 economy,” and that “remand for an immediate award of benefits is appropriate.” *Id.*  
3 Here, the outstanding issue is whether or not a vocational expert may still find an ability  
4 to perform other jobs existing in significant numbers in the national economy despite  
5 additional limitations. Accordingly, remand for further consideration is warranted in this  
6 matter.

7  
8 CONCLUSION

9 Based on these reasons and the relevant record, the Court **ORDERS** that this  
10 matter be **REVERSED** and **REMANDED** pursuant to sentence four of 42 U.S.C. §  
11 405(g) to the Acting Commissioner for further consideration consistent with this order.

12 **JUDGMENT** should be for plaintiff and the case should be closed.

13 Dated this 29<sup>th</sup> day of September, 2015.

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16 J. Richard Creatura  
17 United States Magistrate Judge  
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